



**OHIO COUNTY OCCUPATIONAL TAX**  
**EMPLOYER'S RETURN OF EMPLOYEE'S LICENSE FEE WITHHELD OR DUE**

For Office Use Only

If "\$0" wages paid this period, enter "\$0" or "NONE" and return the form

1. Salaries, wages, commissions & other compensation paid for services performed in Ohio County..... \$ \_\_\_\_\_
2. Tax Due at 1.00% of line 1.... (Line 1 x 1%)..... \$ \_\_\_\_\_
3. Penalty 5.00% per mo. if past due **(Max 25% - Min \$25)** \$ \_\_\_\_\_
4. Interest 12.00% per annum (1% monthly or fraction thereof)....\$ \_\_\_\_\_
5. Adjustment due to: rounding, credit, etc .....(+/-)..... \$ \_\_\_\_\_
6. BALANCE DUE (total of lines 2 thru 5)..... \$ \_\_\_\_\_

Should this account be made inactive? \_\_\_\_NO \_\_\_\_ YES, Effective Date \_\_\_\_\_  
REASON: \_\_\_\_\_

I hereby certify that the information, schedules, statements and exhibits filed herewith are true and correct.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_ Phone Number (270) - \_\_\_\_\_

**PAID BY CHECK #** \_\_\_\_\_

Name: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ KY 00000

Acct No.

**00000**

Indicate name or address change above.

FED ID / SS # \_\_\_\_\_

**PERIOD ENDING**

Month	Day	Year
<b>06</b>	<b>30</b>	<b>2009</b>

**DUE ON or BEFORE**

Month	Day	Year
<b>07</b>	<b>31</b>	<b>2009</b>

Make checks payable and mail to:

**OHIO COUNTY**  
**OCCUPATIONAL TAX ADMINISTRATOR**  
**P.O. BOX 185**  
**HARTFORD KY 42347**

Phone: (270) 298-4410 Fax: (270) 298-4409  
[lugenias@bellsouth.net](mailto:lugenias@bellsouth.net)  
[octaxclerk@bellsouth.net](mailto:octaxclerk@bellsouth.net)

Form OCC-3PT Rev. 7/6/09

**\* Return This Form To The Occupational Tax Office \***